| Fill in this information to identify your case: | | |
|-------------------------------------------------|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF OHIO | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| You | r full name | | |
| your pictu exan | government-issued ire identification (for nple, your driver's | Ellis First name M. | First name |
| | | Middle name | Middle name |
| iden | tification to your | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| | | | |
| your num Indiv Iden | Social Security ber or federal vidual Taxpayer tification number | xxx-xx-9177 | |
| | Write your picture example exa | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Conly the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Ellis First name M. Middle name Lee Last name and Suffix (Sr., Jr., II, III) xxx-xx-9177 |

Official Form 101

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 1127 Victory Street | If Debtor 2 lives at a different address: |
| | | Akron, OH 44301 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Summit | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| Del | otor 1 Ellis M. Lee | | | | (| Case number (if known) |
|-----|------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------|---------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Par | t 2: Tell the Court About Y | /our Bank | runtov Casa | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check o | ne. (For a brief | description of each, see <i>Notic</i> o the top of page 1 and checl | | 1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box. |
| | choosing to file under | ■ Chap | ,, | , , , | | |
| | | ☐ Chap | | | | |
| | | ☐ Chap | | | | |
| | | ☐ Chap | | | | |
| | | — Опар | ner 10 | | | |
| 8. | How you will pay the fee | ab or | out how you ma | ay pay. Typically, if you are parney is submitting your payme | aying the fee you | with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money If, your attorney may pay with a credit card or check with |
| | | | | e fee in installments. If you of Installments (Official Form 10 | | n, sign and attach the Application for Individuals to Pay |
| | | bu ap | t is not required plies to your far | d to, waive your fee, and may mily size and you are unable | do so only if you to pay the fee in | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out al Form 103B) and file it with your petition. |
| 9. | Have you filed for | = N. | | | | |
| • | bankruptcy within the last 8 years? | ■ No. □ Yes. | | | | |
| | | | District | W | hen | Case number |
| | | | District | W | hen | Case number |
| | | | District | W | hen | Case number |
| 10. | Are any bankruptcy | ■ No | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | W | hen | Case number, if known |
| | | | Debtor | | | Relationship to you |
| | | | District | w | hen | Case number, if known |
| 11. | Do you rent your residence? | □ No. | Go to line 1 | 2. | | |

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

Yes.

| Deb | tor 1 Ellis M. Lee | | Case number (if known) | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | | | |
| ar | 3: Report About Any Bu | ısinesses | You Own as a Sole Proprietor | | |
| | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | |
| | business? | ☐ Yes. | Name and location of business | | |
| | A sole proprietorship is a | □ res. | Name and location of pacinious | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, State & ZIP Code | | |
| | it to this petition. | | Check the appropriate box to describe your business: | | |
| | | | ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | |
| | | | ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | |
| | | | ■ None of the above | | |
| 3. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation in 11 U.S | iling under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 3. 1116(1)(B). | | |
| | For a definition of small | ■ No. | I am not filing under Chapter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | |
| | | ☐ Yes. | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code | | |
| ar | Report if You Own or | Have An | Hazardous Property or Any Property That Needs Immediate Attention | | |
| 4. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed. | | Where is the property? | | |
| | or a building that needs urgent repairs? | | | | |
| | 2. g 3. n , opano. | | Number, Street, City, State & Zip Code | | |
| | | | | | |
| | | | | | |

Debtor 1 Ellis M. Lee

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Ellis M. Lee | | | Case number (if | known) |
|------|----------------------------------------------------------------|----------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Part | 6: Answer These Questi | ons for Re | porting Purposes | | |
| 16. | What kind of debts do you have? | | Are your debts primarily consuindividual primarily for a personal | | I in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | | | ess debts? Business debts are debts that or through the operation of the busines | |
| | | | ☐ No. Go to line 16c. | | |
| | | | Yes. Go to line 17. | | |
| | | 16c. - | State the type of debts you owe the | hat are not consumer debts or business d | ebts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. G | to to line 18. | |
| | Do you estimate that after any exempt property is excluded and | | | ou estimate that after any exempt property ele to distribute to unsecured creditors? | y is excluded and administrative expenses |
| | administrative expenses are paid that funds will | | ■ No | | |
| | be available for distribution to unsecured creditors? | | □ Yes | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | 2 5,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | □ 5001-10,000 □ 10,001,35,000 | ☐ 50,001-100,000 ☐ More than100,000 |
| | | ☐ 100-19 ☐ 200-99 | | □ 10,001-25,000 | □ More than 100,000 |
| 19. | How much do you | \$0 - \$5 | 0,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | □ \$50,00 | 1 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | | | 01 - \$500,000 01 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| 20. | How much do you | \$0 - \$5 | 0,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | _ | 1 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | | | 01 - \$500,000 01 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| Part | 7: Sign Below | | | | |
| For | you | I have exa | mined this petition, and I declare | under penalty of perjury that the informat | ion provided is true and correct. |
| | | | | n aware that I may proceed, if eligible, un available under each chapter, and I choos | |
| | | | | ay or agree to pay someone who is not ar tice required by 11 U.S.C. § 342(b). | n attorney to help me fill out this |
| | | I request r | elief in accordance with the chapt | ter of title 11, United States Code, specific | ed in this petition. |
| | | | case can result in fines up to \$2 | cealing property, or obtaining money or p 50,000, or imprisonment for up to 20 year | roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Ellis M. I | | Signature of Debtor 2 | |
| | | Executed | | Executed on | |
| | | | MM / DD / YYYY | MM / D | DD / YYYY |

| Debtor 1 | Ellis M. Lee | Case number (if known) | |
|----------|--------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Mary Lou Burns Signature of Attorney for Debtor | Date | May 9, 2019 MM / DD / YYYY |
|----------------------------------------------------------------------------------|---------------|-------------------------------|
| Mary Lou Burns 0071363 Printed name | | |
| Mary Lou Burns, Attorney at Law Firm name | | |
| 484 S. Miller Road Akron,, OH 44333 Number, Street, City, State & ZIP Code | | |
| Contact phone 330-668-6006 | Email address | yourfreshstart@hotmail.com |
| 0071363 OH Bar number & State | | |

| Fill in th | is information to identify your case: | | | |
|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------|------|
| Debtor 1 | Ellis M. Lee | | | |
| Debior | First Name Middle Name Last Name | | | |
| Debtor 2 (Spouse if, | iling) First Name Middle Name Last Name | | | |
| United S | rates Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO | | | |
| Case nu | nher | | | |
| (if known) | | _ | heck if this is an | |
| | | am | nended filing | |
| O((; -; | -I F 4000 | | | |
| | al Form 106Sum ary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 | |
| Be as co | mplete and accurate as possible. If two married people are filing together, both are equally responsible for on. Fill out all of your schedules first; then complete the information on this form. If you are filing amende inal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Summarize Your Assets | | | ile |
| | | | ur assets ue of what you owr | n |
| 1. Sc l | edule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B | \$_ | (| 0.00 |
| 1b. | Copy line 62, Total personal property, from Schedule A/B | \$_ | 1,165 | 5.66 |
| 1c. | Copy line 63, Total of all property on Schedule A/B | \$_ | 1,165 | 5.66 |
| Part 2: | Summarize Your Liabilities | | | |
| | | | ur liabilities ount you owe | |
| | edule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_ | (| 0.00 |
| | edule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$_ | (| 0.00 |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$_ | 27,961 | 1.99 |
| | Your total liabilities | \$ | 27,961.9 | 99 |
| Part 3: | Summarize Your Income and Expenses | | | |
| | edule I: Your Income (Official Form 106I) y your combined monthly income from line 12 of Schedule I | \$_ | 2,095 | 5.92 |
| | edule J: Your Expenses (Official Form 106J) y your monthly expenses from line 22c of Schedule J | \$_ | 2,125 | 5.00 |
| Part 4: | Answer These Questions for Administrative and Statistical Records | | | |
| 6. Are | you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other | r schedules. | |
| 7. Wh | Yes at kind of debt do you have? | | | |
| • | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8), Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | ı perso | onal, family, or | |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,300.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Debtor 1 | Ellis M. Lee | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the | e: NORTHERN DISTRICT (| OF OHIO | |
| _ | armapioy Court for the | 0. 1101(11)21(11)21(10) | | |
| Case number _ | | | | ☐ Check if this is ar amended filing |
| | | | | · · |
| Official Fo | orm 106A/B | | | |
| _ | le A/B: Pro | nertv | | 12/15 |
| | | <u>. </u> | nce. If an asset fits in more than one category, list | |
| hink it fits best. E | Be as complete and acc re space is needed, atta | curate as possible. If two married | d people are filing together, both are equally respo n. On the top of any additional pages, write your na | nsible for supplying correct |
| Part 1: Describe | e Each Residence, Build | ding, Land, or Other Real Estate | You Own or Have an Interest In | |
| . Do you own or | have any legal or equit | able interest in any residence, b | ouilding, land, or similar property? | |
| ■ No. Go to Pa | art 2 | | | |
| Yes. Where | | | | |
| | | | | |
| Donariba | . Vaur Vahialaa | | | |
| | e Your Vehicles | | | |
| Do you own, lea | ase, or have legal or | | nicles, whether they are registered or not? Ind | |
| Oo you own, lea comeone else dri | ase, or have legal or vives. If you lease a ve | | lle G: Executory Contracts and Unexpired Lease | |
| Do you own, leasomeone else dri | ase, or have legal or vives. If you lease a ve | hicle, also report it on <i>Schedu</i> | lle G: Executory Contracts and Unexpired Lease | |
| Oo you own, leasomeone else dri | ase, or have legal or vives. If you lease a ve | hicle, also report it on <i>Schedu</i> | lle G: Executory Contracts and Unexpired Lease | |
| Do you own, leasomeone else dri | ase, or have legal or vives. If you lease a ve | hicle, also report it on <i>Schedu</i> | lle G: Executory Contracts and Unexpired Lease | |
| Do you own, leasomeone else dri Cars, vans, tr No Yes | ase, or have legal or ives. If you lease a ve rucks, tractors, spor | hicle, also report it on Schedu t utility vehicles, motorcycle | lle G: Executory Contracts and Unexpired Lease | |
| Do you own, leasomeone else dri Cars, vans, tr No Yes | ase, or have legal or ives. If you lease a ve rucks, tractors, spor | hicle, also report it on Schedu t utility vehicles, motorcycle | alle G: Executory Contracts and Unexpired Lease | |
| Do you own, lead comeone else dri | ase, or have legal or ives. If you lease a ve rucks, tractors, spor | hicle, also report it on Schedu t utility vehicles, motorcycle | alle G: Executory Contracts and Unexpired Lease | |
| Do you own, leasomeone else dri Cars, vans, tr No Yes Watercraft, ai Examples: Box | ase, or have legal or ives. If you lease a ve rucks, tractors, spor | hicle, also report it on Schedu t utility vehicles, motorcycle | alle G: Executory Contracts and Unexpired Lease | |
| Oo you own, lead on ome one else dries. Cars, vans, transport. No Yes Watercraft, at Examples: Boat No Yes Add the doll | ase, or have legal or vives. If you lease a vertices, tractors, sportices, tractors, sportices, motor homes ats, trailers, motors, potentials, trailers, motors, potentials. | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest | es all vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories | rs. |
| Do you own, lead comeone else drives Cars, vans, transport No Yes Watercraft, at Examples: Box No Yes Add the doll | ase, or have legal or vives. If you lease a vertices, tractors, sportices, tractors, sportices, motor homes ats, trailers, motors, potentials, trailers, motors, potentials. | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest | es al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories | rs. |
| Do you own, leasomeone else dri Cars, vans, tr No Yes Watercraft, al Examples: Box No Yes Add the doll pages you h | ase, or have legal or vives. If you lease a vertices, tractors, sportices, tractors, sportices, motor homes ats, trailers, motors, potentials are value of the portices are attached for Paragraphs. | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest | es all vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories | rs. |
| Do you own, lead comeone else drivers. Cars, vans, transport of the comeone else drivers. No Yes Watercraft, and Examples: Box No Yes Add the doll pages you here. | ase, or have legal or ives. If you lease a verices, tractors, sportices, tractors, sportices, motor homes ats, trailers, motors, potential value of the portices ave attached for Pares at your Personal and Homes | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest | es al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories attries from Part 2, including any entries for | \$0.00 Current value of the |
| Do you own, leasomeone else dri B. Cars, vans, tr No Yes Watercraft, al Examples: Box No Yes Add the doll pages you h | ase, or have legal or ives. If you lease a verices, tractors, sportices, tractors, sportices, motor homes ats, trailers, motors, potential value of the portices ave attached for Pares at your Personal and Homes | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your ent 2. Write that number here | es al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories attries from Part 2, including any entries for | \$0.00 |
| Oo you own, lead comeone else drivers. Cars, vans, transport of the comeone else drivers. No Yes No Yes No Yes Add the doll pages you here. | ase, or have legal or elives. If you lease a verices, tractors, sportium, tractors, sportium, tractors, motor homes ats, trailers, motors, polar value of the portionave attached for Para e Your Personal and Holland have any legal or equipment. | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your en t 2. Write that number here | es al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories attries from Part 2, including any entries for | Current value of the portion you own? |
| Oo you own, lead comeone else drivers. Cars, vans, transports. No Yes Watercraft, and Examples: Boat Section of the composition of the composit | ase, or have legal or evives. If you lease a verives. If you lease a verives, tractors, sportium, and the large attached for Paragonal and Howard any legal or equipoods and furnishing lajor appliances, furnit | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your en t 2. Write that number here | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories ntries from Part 2, including any entries for | Current value of the portion you own? Do not deduct secured |
| No Yes No Yes No Yes Add the doll pages you h Part 3: Describe Do you own, lea | ase, or have legal or evives. If you lease a verives. If you lease a verives, tractors, sportium, and the large attached for Paragonal and Howard any legal or equipoods and furnishing lajor appliances, furnit | t utility vehicles, motorcycle s, ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your en t 2. Write that number here pusehold Items quitable interest in any of the | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories ntries from Part 2, including any entries for | Current value of the portion you own? Do not deduct secured |

examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Official Form 106A/B Schedule A/B: Property page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

| De | btor 1 | Ellis M. Lee | | Case number (if known |) |
|-----|-------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------------------------|
| | Yes. | Describe | | | |
| | | Cell | phone, television | | \$500.00 |
| | Exampl | other collections, m | nes; paintings, prints, or other artwork; bo emorabilia, collectibles | ooks, pictures, or other art objects; stamp, coi | n, or baseball card collections; |
| 9. | Equipm | ent for sports and holdes: Sports, photographic musical instruments | ic, exercise, and other hobby equipment; | bicycles, pool tables, golf clubs, skis; canoes | s and kayaks; carpentry tools; |
| | ■ No □ Yes. | Describe | | | |
| | ■ No | | guns, ammunition, and related equipmer | nt | |
| | □ No Î | | furs, leather coats, designer wear, shoes | s, accessories | |
| | | | aring Apparel - Miscellaneous iten ater than \$200. | ns with no one item valued | \$100.00 |
| | ■ No | | costume jewelry, engagement rings, wed | dding rings, heirloom jewelry, watches, gems, | gold, silver |
| 13. | Non-fa Examp ■ No | nrm animals bles: Dogs, cats, birds, l | horses | | |
| 14. | Any ot ■ No | her personal and hou | sehold items you did not already list, | including any health aids you did not list | |
| | ☐ Yes. | Give specific information | on | | |
| 15 | | | of your entries from Part 3, including a er here | any entries for pages you have attached | \$1,100.00 |
| Pa | rt 4: De | scribe Your Financial As | sets | | |
| Do | you ov | vn or have any legal o | r equitable interest in any of the follow | wing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | | n your wallet, in your home, in a safe dep | posit box, and on hand when you file your pet | ition |
| 17. | Deposi | its of money bles: Checking, savings | | of deposit; shares in credit unions, brokerage | houses, and other similar |

19-51098-amk Doc 1 FILED 05/10/19 ENTERED 05/10/19 16:11:34 Page 11 of 56

Schedule A/B: Property

Official Form 106A/B

page 2

| Debto | or 1 | Ellis M. Lee | | | | С | ase number (if known) | |
|----------------|------------------------|---------------------------------------------|-------------------|-----------------------------------|------------------------------------------------|------------------------------------------------------------------------------------|---------------------------|-----------------------------|
| | Yes | | | | Institution | n name: | | |
| | | | 17.1. | Checking | Chase I | Bank - #5919 - Estima | ted Balance | \$65.64 |
| | | | 17.2. | Savings | Chase I | Bank - #9132 - Estima | ted balance | \$0.02 |
| | xamp | , mutual funds, onles: Bond funds, | | | | oney market accounts | | |
| | Yes | | | Institution or iss | suer name: | | | |
| jo ■ | oint v No | ablicly traded stoemture Give specific info | | | • | corporated businesses, | including an interest | in an LLC, partnership, and |
| | | · | | me of entity: | | C | % of ownership: | |
| ^ ^ | legoti Ion-ne No | iable instruments | include pents are | personal checks those you cann | , cashiers' checks, p | -negotiable instruments romissory notes, and mon ne by signing or delivering | | |
| E ■ | xamp No | nent or pension bles: Interests in I | RA, ERIS | SA, Keogh, 401 | (k), 403(b), thrift savi | ngs accounts, or other per | nsion or profit-sharing p | olans |
| | | | | of account: | Institution | n name: | | |
| Υ | our s | | d deposit | ts you have mad | | ontinue service or use fron electric, gas, water), teleco | | es, or others |
| | | | | | Institution | n name or individual: | | |
| | nnuit i No | ies (A contract fo | or a perio | dic payment of r | money to you, either | for life or for a number of y | years) | |
| | Yes | lss | suer nam | e and description | on. | | | |
| | U.S. | ts in an education C. §§ 530(b)(1), § | , | | ո a qualified ABLE բ | program, or under a qual | ified state tuition pro | gram. |
| | | Ins | stitution r | name and descr | iption. Separately file | e the records of any interes | sts.11 U.S.C. § 521(c): | |
| 25. T r | | , equitable or fu | ture inte | rests in proper | ty (other than anyth | ning listed in line 1), and | rights or powers exer | rcisable for your benefit |
| | Yes. | Give specific info | ormation | about them | | | | |
| | xamp | | | | s, and other intelled oceeds from royalties | ctual property s and licensing agreement | ts | |
| | | Give specific info | ormation | about them | | | | |
| _E | xamp | es, franchises, a ples: Building per | | | | tion holdings, liquor license | es, professional license | es |
| | | Give specific info | ormation | about them | | | | |
| Mone | y or | property owed t | o you? | | | | | Current value of the |

Official Form 106A/B Schedule A/B: Property page 3

| De | btor 1 | Ellis M. Lee | Case numb | er (if known) |
|-----|------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------|
| | | | | Do not deduct secured claims or exemptions. |
| | _ | inds owed to you | | |
| | ■ No | Vivo apositio information about them | ncluding whether you already filed the returns and the tax y | ooro. |
| | □ 165. C | ove specific information about them, | riciduling whether you already liled the returns and the tax y | Edi5 |
| | _ ′ | | ousal support, child support, maintenance, divorce settleme | ent, property settlement |
| | ■ No □ Yes G | Sive specific information | | |
| | 00. 0 | arvo opodnio inicimationi | | |
| | | mounts someone owes you es: Unpaid wages, disability insuranc benefits; unpaid loans you made | e payments, disability benefits, sick pay, vacation pay, work to someone else | cers' compensation, Social Security |
| | | Give specific information | | |
| | | s in insurance policies es: Health, disability, or life insurance | ; health savings account (HSA); credit, homeowner's, or ren | nter's insurance |
| | | lame the insurance company of each | | |
| | | Company name | : Beneficiary: | Surrender or refund value: |
| | If you a | erest in property that is due you from the beneficiary of a living trust, expute has died. | m someone who has died ect proceeds from a life insurance policy, or are currently er | ntitled to receive property because |
| _ | ■ No □ Yes. (| Give specific information | | |
| | | | | |
| | | against third parties, whether or no es: Accidents, employment disputes, | of you have filed a lawsuit or made a demand for payment insurance claims, or rights to sue | nt |
| ı | ☐ Yes. I | Describe each claim | | |
| | Other co | ontingent and unliquidated claims | of every nature, including counterclaims of the debtor a | nd rights to set off claims |
| I | ☐ Yes. I | Describe each claim | | |
| | Any fina ■ No | ncial assets you did not already lis | st | |
| I | ☐ Yes. (| Give specific information | | |
| 36. | | | from Part 4, including any entries for pages you have a | ttached \$65.66 |
| Par | t 5: Des | cribe Any Business-Related Property Yo | ou Own or Have an Interest In. List any real estate in Part 1. | |
| 37. | Do you o | wn or have any legal or equitable intere | st in any business-related property? | |
| | No. Go | o Part 6. | | |
| | Yes. Go | to line 38. | | |
| Par | | cribe Any Farm- and Commercial Fishin u own or have an interest in farmland, list i | g-Related Property You Own or Have an Interest In. t in Part 1. | |
| 46. | _ ` | own or have any legal or equitable to to Part 7. | interest in any farm- or commercial fishing-related prop | erty? |
| | ☐ Yes. | Go to line 47. | | |

Official Form 106A/B Schedule A/B: Property page 4

| Debto | r1 Ellis M. Lee | | | Case number (if known) | |
|--------------|-----------------------------|--------------------------------------------------------------------|-----------------------|------------------------------|------------|
| Part 7: | Describe All Proper | ty You Own or Have an Interest in That Yo | ou Did Not List Above | | |
| E: | xamples: Season tickets, | ty of any kind you did not already list country club membership | 1? | | |
| | res. Give specific informa | ation | | | |
| | | Any personal property, including Income Credit or Additional Ch | | elated to Earned | Unknown |
| | | [100 | | 1 | |
| | | Wages | | | Unknown |
| | | Tax Refund related to Earned I | noomo Crodit and A | Additional Child Tay | |
| | | Credit | ncome Credit and A | additional Child Tax | Unknown |
| | | | | | |
| 54. A | Add the dollar value of a | II of your entries from Part 7. Write the | nat number here | | \$0.00 |
| Part 8: | List the Totals of Eac | h Part of this Form | | | |
| 55. P | Part 1: Total real estate, | line 2 | | | \$0.00 |
| 56. P | Part 2: Total vehicles, lir | ne 5 | \$0.00 | • | |
| 57. P | Part 3: Total personal an | d household items, line 15 | \$1,100.00 | | |
| 58. P | Part 4: Total financial as | sets, line 36 | \$65.66 | | |
| 59. P | Part 5: Total business-re | elated property, line 45 | \$0.00 | | |
| 60. F | Part 6: Total farm- and fi | shing-related property, line 52 | \$0.00 | | |
| 61. P | Part 7: Total other prope | rty not listed, line 54 | ÷\$0.00 | | |
| 62. T | Total personal property. | Add lines 56 through 61 | \$1,165.66 | Copy personal property total | \$1,165.66 |
| 63. T | Total of all property on S | Schedule A/B. Add line 55 + line 62 | | | \$1,165.66 |

Official Form 106A/B Schedule A/B: Property page 5

| to identify your case: | • | | | |
|------------------------|--------------------------|------------------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| is M. Lee | | | | |
| Name | Middle Name | Last Name | | |
| | | | | |
| Name | Middle Name | Last Name | | |
| cy Court for the: NO | ORTHERN DISTRICT OF OHIG | 0 | | |
| | | | | Check if this is an amended filing |
| | Name Name | Name Middle Name Name Middle Name | Name Middle Name Last Name Name Middle Name Last Name | Name Middle Name Last Name Name Middle Name Last Name Ey Court for the: NORTHERN DISTRICT OF OHIO |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with | th vou. |
|-------------------------------------------------------------------------------------------------|---------|
|-------------------------------------------------------------------------------------------------|---------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|----------------------------------------------------------------------------------------|--------------------------------------|-----|-----------------------------------------------------------------|-------------------------------------------|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| Household Goods and Furnishings - Miscellaneous items with no one | \$500.00 | | \$12,800.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| item valued greater than \$500. Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(4)(a) | |
| Cell phone, television Line from Schedule A/B: 7.1 | \$500.00 | | \$500.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| Line Holli Golleddie AVD. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(4)(a) | |
| Wearing Apparel - Miscellaneous items with no one item valued | \$100.00 | | \$100.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| greater than \$200. Line from <i>Schedule A/B</i> : 11.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: 1)(: 1)(0) | |
| Checking: Chase Bank - #5919 - Estimated Balance | \$65.64 | | \$65.64 | Ohio Rev. Code Ann. § 2329.66(A)(3) | |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: 5)(0) | |
| Savings: Chase Bank - #9132 - Estimated balance | \$0.02 | | \$0.02 | Ohio Rev. Code Ann. § 2329.66(A)(3) | |
| Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

| De | ebtor 1 EIIIS M. Lee | | | Case number (if known) | | | | | |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----|-----------------------------------------------------------------|-------------------------------------------|--|--|--|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | Specific laws that allow exemption | | | | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | | |
| | Any personal property, including tax refund not related to Earned Income | Unknown | | \$434.34 | Ohio Rev. Code Ann. § 2329.66(A)(3) | | | | |
| | Credit or Additional Child Tax Credit Line from Schedule A/B: 53.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: 1)(0) | | | | |
| | Any personal property, including tax refund not related to Earned Income | Unknown | | \$1,325.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) | | | | |
| | Credit or Additional Child Tax Credit Line from Schedule A/B: 53.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020100(//)(10) | | | | |
| | Wages Line from Schedule A/B: 53.2 | Unknown | | 75% | Ohio Rev. Code Ann. § 2329.66(A)(13) | | | | |
| | Elife from Gonedate Arb. 33.2 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(10) | | | | |
| | Tax Refund related to Earned Income Credit and Additional Child Tax | Unknown | | 100% | Ohio Rev. Code Ann. § 2329.66(A)(9)(f) | | | | |
| | Credit Line from Schedule A/B: 53.3 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: 1)(0)(:) | | | | |
| 3. | Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) | | | | | | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? | | | | | | | | |
| | □ No | • | | • | | | | | |
| | ☐ Yes | | | | | | | | |

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-----------|-----------------------|
| Debtor 1 | Ellis M. Lee | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Case number | | | | Chapte if this is an |
| (II KHOWH) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

| Fill i | n this inforn | nation to identify your c | case: | | | | | |
|------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------|
| Debt | tor 1 | Ellis M. Lee | | | | | | |
| D. I. | 0 | First Name | Middle Na | ame | Last Name | | | |
| Debt (Spou | se if, filing) | First Name | Middle Na | ame | Last Name | | | |
| Unite | ed States Ba | nkruptcy Court for the: | NORTHERN | N DISTRICT OF (| OHIO | | | |
| Case | e number _ | | | _ | | | | Check if this is an |
| (| , | | | | | | _ | amended filing |
| Sch Be as any ex Scheo Scheo | complete and xecutory cont dule G: Execu dule D: Credit | racts or unexpired leases story Contracts and Unexpi ors Who Have Claims Secu | e Part 1 for cre that could resu red Leases (Of ured by Proper | ditors with PRIOR alt in a claim. Also fficial Form 106G). ty. If more space is | ITY claims and list executory Do not include s needed, copy | Part 2 for creditors with NONF contracts on Schedule A/B: Pre any creditors with partially set the Part you need, fill it out, n do not file that Part. On the to | operty (Office cured claims umber the en | ial Form 106A/B) and on s that are listed in stries in the boxes on the |
| name Part | | nber (if known). II of Your PRIORITY Un: | secured Clair | ms | | | | |
| 1. [| Oo any credito | ors have priority unsecured | d claims agains | st you? | | | | - |
| ı | No. Go to P | Part 2. | | | | | | |
| [| ☐ Yes. | | | | | | | |
| Part | 2: List A | II of Your NONPRIORIT | Y Unsecured | Claims | | | | |
| 3. [| Oo any credito | ors have nonpriority unsec | ured claims ag | ainst you? | | | | |
| [| ☐ No. You hav | ve nothing to report in this pa | art. Submit this f | form to the court wit | th your other sch | nedules. | | |
| ı | Yes. | | | | | | | |
| t t | insecured clair | m, list the creditor separately | for each claim. | For each claim liste | ed, identify what | o holds each claim. If a credito type of claim it is. Do not list clai n three nonpriority unsecured cla | ms already in | cluded in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 | Big Lot | s Corp. | | Last 4 digits of ac | count number | | | Unknown |
| | | y Creditor's Name Dublin Granville Roa | ad | When was the de | bt incurred? | 2018 | | - |
| | Number S | treet City State Zip Code rred the debt? Check one. | | As of the date you | u file, the claim | is: Check all that apply | | |
| | Debtor | 1 only | | ☐ Contingent | | | | |
| | ☐ Debtor | 2 only | | ☐ Unliquidated | | | | |
| | ☐ Debtor | 1 and Debtor 2 only | | ☐ Disputed | | | | |
| | ☐ At leas | at one of the debtors and ano | ther | Type of NONPRIC | RITY unsecure | ed claim: | | |
| | Check if this claim is for a community | | | ☐ Student loans | | | | |
| | debt Is the clai | m subject to offset? | | ☐ Obligations aris | sing out of a sep aims | aration agreement or divorce tha | it you did not | |
| | ■ No | | | | | ng plans, and other similar debts | | |
| | ☐ Yes | | | Other. Specify | Furniture | | | _ |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

36631

Best Case Bankruptcy

| Debtor 1 Ellis M. Lee | | Case number (if known) | | | | | |
|-----------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------|------------|--|--|--|
| 4.2 | Buckeye State Credit Union | Last 4 digits of account number | Unknown | | | | |
| | Nonpriority Creditor's Name 197 E. Thornton Street Akron, OH 44309 | When was the debt incurred? | 2004 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| 4.3 | Cbe Group | Last 4 digits of account number | 5762 | \$1,180.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 1309 Technology Parkway | When was the debt incurred? | Opened 08/18 | | | | |
| | Cedar Falls, IA 50613 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | |
| | No | Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify Collection Communic | Attorney Charter ations | | | | |
| 4.4 | CCI/Contract Callers Inc | Last 4 digits of account number | 0326 | \$937.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? | Opened 12/25/18 | | | | |
| | 501 Greene St Ste 302 Augusta, GA 30901 | mish was the asst mountain. | Ореней 12/23/10 | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | |
| | lacksquare At least one of the debtors and another | | | | | | |
| | ☐ Check if this claim is for a community debt | 0 0 1 | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | No | Debts to pension or profit-sharir | | | | | |
| | Yes | ■ Other. Specify Collection | Attorney T-Mobile Usa Inc. | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 9

| Debte | or 1 Ellis M. Lee | | Case number (if known) | | | | | | | |
|-------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------|--|--|--|--|--|--|
| 4.5 | Centralized Business Solutions, Inc | Last 4 digits of account number | 3387 | \$236.00 | | | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2818 | When was the debt incurred? | Opened 08/15 | | | | | | | |
| | North Canton, OH 44720 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| | _ | | | | | | | | | |
| | Debtor 1 only | Contingent | | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | | | | |
| | ☐ At least one of the debtors and another | Student loans | u Claini. | | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | | | | | | | |
| | No | Debts to pension or profit-sharing | og plans, and other similar debts | | | | | | | |
| | ■ NO | · | | | | | | | | |
| | Yes | Other. Specify Medical Sp | Attorney General Emergency ec | | | | | | | |
| 1.6 | Citizens Bank | Last 4 digits of account number | 9318 | \$1,039.99 | | | | | | |
| | Nonpriority Creditor's Name One Citizens Plaza Providence, RI 02903 | When was the debt incurred? | 02/2019 | | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | | |
| | ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | | | | | | | | |
| | Yes | ■ Other. Specify Bank card | | | | | | | | |
| 1.7 | Dbs Financial/ABC Motor Credit Nonpriority Creditor's Name | Last 4 digits of account number | 5001 | \$6,185.00 | | | | | | |
| | Attn: Bankruptcy 2823 Gilchrist Rd | When was the debt incurred? | Opened 09/11 Last Active 3/31/18 | | | | | | | |
| | Akron, OH 44305 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| | Who incurred the debt? Check one. | _ | or orion all that apply | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | | | | | | | |
| | Is the claim subject to offset? | report as priority claims | and an and attention to the | | | | | | | |
| | ■ No | Debts to pension or profit-sharin | | | | | | | | |
| | ☐ Yes ☐ Other. Specify Repossessed Automobile | | | | | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 9

| 1 Ellis M. Lee | Case number (if known) | |
|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------|
| Dominion East Ohio | Last 4 digits of account number | Unknowr |
| Nonpriority Creditor's Name P. O. Box 26785 Pickmand, VA 23264, 6785 | When was the debt incurred? | |
| Richmond, VA 23261-6785 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| _ | | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Gas usage | |
| First Energy | Last 4 digits of account number | Unknowr |
| Nonpriority Creditor's Name 76 S. Main Street Akron, OH 44308 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Electric usage | |
| First Federal Credit Control | Last 4 digits of account number 6467 | \$310.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | When was the debt incurred? Opened 11/12 | · |
| 24700 Chagrin Blvd, Ste 205 Cleveland, OH 44122 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the diam is. Oncok an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Collection Attorney Emergency Other. Specify Associatessumma | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 9

| Ellis M. Lee | | Case number (if known) | | | | | |
|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------|--|--|--|--|
| First Federal Credit Control | Last 4 digits of account number | 4087 | \$267.0 | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 | When was the debt incurred? | Opened 08/13 | | | | | |
| Cleveland, OH 44122 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | 7.5 07 11.0 11.10 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 7.11.0 | or or one of the cappage | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| □Yes | ■ Other. Specify Associates | Attorney Emergency summa | | | | | |
| First Federal Credit Control | Last 4 digits of account number | 7007 | \$225.00 | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 | When was the debt incurred? | Opened 7/02/12 | | | | | |
| Cleveland, OH 44122 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | _ | | | | | | |
| Debtor 1 only | Contingent | | | | | | |
| Debtor 2 only | Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | | | |
| At least one of the debtors and another | Student loans | J. Glatti. | | | | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | _ | ration agreement or divorce that you did not | | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| ☐ Yes | | Associatessumma | | | | | |
| First Federal Credit Control | Last 4 digits of account number | 4086 | \$225.0 | | | | |
| lonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 | When was the debt incurred? | Opened 08/13 | | | | | |
| Cleveland, OH 44122 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| debt s the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| ☐ Yes | Collection A Specify Associates | Attorney Emergency | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 9

Best Case Bankruptcy

| Debtor 1 Ellis M. Lee | | Case number (if known) | | | | | | | |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------|--|--|--|--|--|--|
| First Federal Credit Control | Last 4 digits of account number | 6253 | \$225.00 | | | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 Cleveland, OH 44122 | When was the debt incurred? | Opened 12/13 | | | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | As of the date you file, the claim is: Check all that apply | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | | |
| Debtor 2 only | Unliquidated | | | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | | |
| ☐ Check if this claim is for a communit | sy Student loans | ☐ Student loans | | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | | |
| ☐ Yes | ■ Other. Specify Associates | Attorney Emergency summa | | | | | | | |
| First Federal Credit Control | Last 4 digits of account number | 4050 | \$225.00 | | | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 | When was the debt incurred? | Opened 04/13 | | | | | | | |
| Cleveland, OH 44122 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| _ | | | | | | | | | |
| ■ Debtor 1 only | Contingent | | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | | | | |
| ☐ Check if this claim is for a communit | | | | | | | | | |
| debt Is the claim subject to offset? | | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | | |
| Yes | Collection Associates | Attorney Emergency summa | | | | | | | |
| 1 Gatewyfinsol | Last 4 digits of account number | 0237 | \$13,704.00 | | | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 999 S. Washington Ave., Ste. 1 Saginaw, MI 48601 | When was the debt incurred? | Opened 5/15/18 Last Active 10/17/18 | | | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| Who incurred the debt? Check one. | _ | | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| Debtor 1 and Debtor 2 only | ' | Disputed | | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured Student loans | u Ciaiill. | | | | | | | |
| ☐ Check if this claim is for a communit debt | <u>_</u> | aration agreement or divorce that you did not | | | | | | | |
| Is the claim subject to offset? | report as priority claims | mation agreement of divorce that you did not | | | | | | | |
| No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | | | | | | | |
| Yes | Other Specify Repossess | Other Specify Repossessed Automobile | | | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 9

| Ellis M. Lee | Case number (if known) | |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------|
| Huntington Bank | Last 4 digits of account number | Unknow |
| Nonpriority Creditor's Name 7450 Huntington Park Drive | When was the debt incurred? | |
| Columbus, OH 43235 Number Street City State Zip Code | As of the date were file the plaint in O | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | Continuent | |
| | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| Jefferson Capital Systems, LLC | Last 4 digits of account number 7003 | \$3,203. |
| Nonpriority Creditor's Name | | |
| Po Box 1999 Saint Cloud, MN 56302 | When was the debt incurred? Opened 10/16 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Wireless | |
| KeyBank | Last 4 digits of account number | Unknov |
| Nonpriority Creditor's Name 127 Public Square Cleveland, OH 44114 | When was the debt incurred? 2017 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

| Depto | F1 EIIIS M. Lee | Case number (if known) | | | | | |
|-------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------|--|--|--|--|
| 4.2 | Ohio Dept of Motor Vehicles | Last 4 digits of account number | Unknown | | | | |
| | Nonpriority Creditor's Name 1970 West Broad Street | When was the debt incurred? | | | | | |
| | Columbus, OH 43223 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | ■ Other Specify Reinstatement Fees | | | | | |
| 4.2 | | | | | | | |
| 1 | QVC | Last 4 digits of account number | Unknown | | | | |
| | Nonpriority Creditor's Name QVC Studio Park 1200 Wilson Drive | When was the debt incurred? 2015,2016 | | | | | |
| | West Chester, PA 19380-4262 | | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | \square Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Credit card | | | | | |
| 4.2 | Time Warner/Spectrum | Last 4 digits of account number | Unknown | | | | |
| | Nonpriority Creditor's Name 1919 Brittain Road Akron, OH 44310 | When was the debt incurred? 2017 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ At least one or the deptors and another ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | ☐ Yes | Other. Specify Cable service | | | | | |
| | | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Debtor 1 Ellis M. Lee | | Case number (if known) | | | | |
|-------------------------------------------------------|-------------------------------------------|-------------------------------------------------------|--|--|--|--|
| Name and Address | On which entry in Part 1 or Part 2 d | Part 2 did you list the original creditor? | | | | |
| Franco M. Barile, LLC | Line 4.7 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| 10900 Pearl Road, Suite C-3 Strongsville, OH 44136 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Strongsvine, Off 44130 | Last 4 digits of account number | 4387 | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Robert E. Soles Jr., CO., LPA | Line <u>4.16</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| 6545 Market Avenue North North Canton, OH 44721 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | 0237 | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| | | | | |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | • | 6c. | · * —— | 0.00 |
| | | | · | 0.00 |
| ou. | one. Add all other priority disecuted dains. Write that amount here. | ou. | Φ | 0.00 |
| 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | |
| | | | | Total Claim |
| 6f. | Student loans | 6f. | \$ | 0.00 |
| | | | | |
| 6g. | Obligations arising out of a separation agreement or divorce that | 6a | \$ | 0.00 |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount | 6i. | , | 27,961.99 |
| | here. | | <u> </u> | 21,301.39 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 27,961.99 |
| | 6b. 6c. 6d. 6e. 6f. 6g. 6h. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |

| Fill in this infor | Fill in this information to identify your case: | | | | | | |
|-----------------------------------------|-------------------------------------------------|-------------------|-----------|--|-----------------------------------------|--|--|
| Debtor 1 | Ellis M. Lee | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF OHIO | | | | |
| Case number | | | | | Charlett this is an | | |
| (II KIIOWII) | | | | | ☐ Check if this is an amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|-----------------------------------------------|---------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | , | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | Oity | | State | Zii Code | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Best Case Bankruptcy

| Fill in this in | formation to identify your | case: | | | |
|-----------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Debtor 1 | Ellis M. Lee | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | orm 106H le H: Your Cod | ebtors | | | 12/15 |
| people are fili fill it out, and your name an | ng together, both are equ | ally responsible for supp boxes on the left. Attach . Answer every question | olying correct information the Additional Page to t | n. If more space is this page. On the to | rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write |
| □ No | | | | | |
| Yes | | | | | |
| | the last 8 years, have you California, Idaho, Louisiana, | | | | ty states and territories include) |
| ■ No. Go | to line 3. | | | | |
| ☐ Yes. D | id your spouse, former spou | use, or legal equivalent live | with you at the time? | | |
| in line 2 | again as a codebtor only i 6D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make su | re you have listed t | ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill |
| | lumn 1: Your codebtor le, Number, Street, City, State and Zl | P Code | | Column 2: The cr Check all schedul | editor to whom you owe the debt es that apply: |
| 112 | neca L. Harris 27 Victory Street ron, OH 44301 | | | ☐ Schedule D, ■ Schedule E/F ☐ Schedule G _ Gatewyfinsol | , line 4.16 |

Schedule H: Your Codebtors

| Fill | in this information to identify your c | aca. | | | | | | | | |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------------|---------------------|----------------|---------------------|-------------------------------|-------------------------|------------------------------|-----------------|
| | ptor 1 Ellis M. Lee | | | | | | | | | |
| | otor 2 use, if filing) | | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF OHIO | | | | | | | |
| | se number lown) | | - | | | | | ed filing ent showin | g postpetition | |
| O | fficial Form 106I | | | | | _ | | | ollowing date: | |
| | chedule I: Your Inc | ome | | | | N | /IM / DD/ Y | YYYY | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not fili r spouse is not filing w | ng jointly, and your ith you, do not inclu | spouse ude infor | is liv mati | ing with on abou | you, incl t your spe | ude inforrouse. If m | nation about ore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed | | | | ■ Employed | | | |
| | | Employment status | ☐ Not employed | | | | ☐ Not employed | | | |
| | employers. | Occupation | Laborer | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Joann Stores, | LLC | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 5555 Darrow R Hudson, OH 44 | | | | ОН | | | |
| | | How long employed t | here? Two m | onths | | | _ | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | | |
| spou If yo | mate monthly income as of the duse unless you are separated. u or your non-filing spouse have me | ore than one employer, co | - | | | | | | • | |
| more | e space, attach a separate sheet to | this form. | | | | Far Dal | hton 4 | Far Da | hta= 0 a= | |
| | | | | | | For De | otor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 2 | ,166.67 | \$ | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 2,1 | 66.67 | \$ | 0.00 | |

| 2. | Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. | | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------|
| 1. | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in S Specify: | Schedule J. 11. +\$ | 0.00 |
| | | | |
| | Add the entries in line to for Debtor 1 and Debtor 2 of Hori-Hilling Spouse. | | |

Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it
applies

| 12. | \$ | 2,095.92 | | | | |
|-------------------------|----|----------|--|--|--|--|
| Combined monthly income | | | | | | |

13. Do you expect an increase or decrease within the year after you file this form?

1

| No. | |
|---------------|--|
| Yes. Explain: | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this information to identify yo | our case: | | | | | |
|------------|----------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------|--------------------------------------------------|------------------------------|--------------------------------------|-------------------------------------------------------|
| Deb | etor 1 Ellis M. Lee | | | | Check | t if this is: | |
| 1 | otor 2 ouse, if filing) | | | | | | ving postpetition chapter the following date: |
| `` | | . NODTL | JEDN DISTRICT OF OUIO | | _ | MM / DD / YYYY | |
| Unit | ted States Bankruptcy Court for the | : NORTH | 1EKN DISTRICT OF OHIO | | N | /וואו / טט / א א א | |
| 1 | nown) | | | | | | |
| | fficial Form 106J | _ | | | | | |
| Be info | chedule J: Your as complete and accurate as complete and accurate as primation. If more space is ne mber (if known). Answer even | possible eded, atta | . If two married people ar | | | | |
| Par 1. | t 1: Describe Your House Is this a joint case? | hold | | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live | in a separ | ate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 mus | st file Offic | ial Form 106J-2, <i>Expen</i> ses | for Separate House | hold of Debto | or 2. | |
| 2. | Do you have dependents? | □ No | | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | □ No |
| | dependents names. | | | CHILD | | 4 | ■ Yes □ No |
| | | | | CHILD | | 11 | ■ Yes |
| | | | | | | | □ No |
| | | | | CHILD | | 16 | ■ Yes |
| | | | | | | | □ No |
| 3. | Do your expenses include expenses of people other t yourself and your depende | han _— | No Yes | | | | ☐ Yes |
| Est | Estimate Your Ongoi imate your expenses as of your expenses as of a date after the olicable date. | our bankr | uptcy filing date unless y | ou are using this fo lemental <i>Schedule</i> | orm as a sup J, check the | plement in a Cha box at the top o | apter 13 case to report f the form and fill in the |
| the | lude expenses paid for with value of such assistance an ficial Form 106l.) | | | | | Your expe | enses |
| 4. | The rental or home owners payments and any rent for the | | - | nclude first mortgage | 4. \$ | | 550.00 |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, re | pair, and | upkeep expenses | | 4c. \$ | | 0.00 |
| 5 | 4d. Homeowner's associate | | | mo oquity loose | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional mortgage payme | ente for y | our residence, such as no | me equity loans | 5. \$ | | 0.00 |

| ebtor 1 | Ellis M. Lee | Case num | ber (if known) | |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------|--------------------------|
| 1 14:11: | tios: | | | |
| 6. Utili 6a. | ties: Electricity, heat, natural gas | 6a. | \$ | 350.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · | 140.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | : | 130.00 |
| 6d. | Other. Specify: | 6d. | | 0.00 |
| | d and housekeeping supplies | — 7. | · | 650.00 |
| | dcare and children's education costs | 8. | \$ | 0.00 |
| | hing, laundry, and dry cleaning | 9. | \$ | 50.00 |
| | sonal care products and services | 10. | \$ | 80.00 |
| | ical and dental expenses | 11. | | 50.00 |
| | ISPORTATION. Include gas, maintenance, bus or train fare. | 11. | Ψ | 30.00 |
| | not include car payments. | 12. | \$ | 75.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 50.00 |
| | ritable contributions and religious donations | 14. | · | 0.00 |
| | rance. | | · | 0.00 |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 0.00 |
| | Other insurance. Specify: | 15d. | · - | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| Spec | | 16. | \$ | 0.00 |
| • | allment or lease payments: | | Ψ | 0.00 |
| | Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | Other. Specify: | 17d. | · | 0.00 |
| | r payments of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| | r payments of allinony, maintenance, and support that you did not report as ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spec | | 19. | <u> </u> | 0.00 |
| | er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e | | our Income | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | · | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | Homeowner's association or condominium dues | 20a. 20e. | · | 0.00 |
| | | | φ +\$ | |
| . Othe | er: Specify: | | +\$ | 0.00 |
| 2. Calc | culate your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 2,125.00 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,125.00 |
| 220. | Add line 22a and 22b. The result is your monthly expenses. | | Φ | 2,125.00 |
| 3. Calc | culate your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,095.92 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,125.00 |
| | | | | |
| 23c. | Subtract your monthly expenses from your monthly income. | | | |
| | The result is your monthly net income. | 23c. | \$ | -29.08 |
| For e | you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage? | | | or decrease because of a |
| ■ N | lo. | | | |
| ■ N □ Y | | | | |

| Fill in this informa | tion to identify your | case: | | | |
|----------------------------------|--------------------------------------------------|--------------------------|------------------------------|------------------------------------------------------------|-----------------------------------------------------------------|
| Debtor 1 | Ellis M. Lee | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bank | ruptcy Court for the: | NORTHERN DISTRIC | T OF OHIO | | |
| Case number | | | | | ☐ Check if this is an amended filing |
| Official Form Declaration | | ın Individua | l Debtor's Sc | hedules | 12/15 |
| obtaining money o | r property by fraud ir J.S.C. §§ 152, 1341, 1 | n connection with a bar | | a. Making a false statemen in fines up to \$250,000, or | t, concealing property, or imprisonment for up to 20 |
| Did you pay o | or agree to pay some | one who is NOT an atto | orney to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. Na | me of person | | | | cy Petition Preparer's Notice, Signature (Official Form 119) |
| | of perjury, I declare rue and correct. | that I have read the sur | nmary and schodules file | ed with this declaration an | d |
| | | | illiary and schedules me | | |
| X /s/ Ellis N | И. Lee | | x | | |
| Ellis M. L | | | · | Debtor 2 | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

| Fill in this inform | | | | | |
|---------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|
| Fill in this infor | mation to identify you | r case: | | | |
| Debtor 1 | Ellis M. Lee | Middle Name | Last Name | | |
| Debtor 2 | riist name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT (| OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| 0(": 15 | 407 | | | | |
| Official Fo | | | | | |
| Statement | of Financial | Affairs for Individ | duals Filing for B | sankruptcy | 4/19 |
| | | ible. If two married people a attach a separate sheet to | | | |
| | n). Answer every que | | | y additional pages, write y | our name and out |
| Part 1: Give I | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is you | ır current marital statı | ıs? | | | |
| _ | | | | | |
| ☐ Married | | | | | |
| ■ Not ma | irriea | | | | |
| 2. During the I | last 3 years, have you | lived anywhere other than | where you live now? | | |
| □ No | | | | | |
| Yes. Lis | st all of the places you | ived in the last 3 years. Do no | ot include where you live nov | <i>I</i> . | |
| Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| | son Avenue | From-To: 2016 - 2018 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 |
| Akron, Ol | 1 44305 | 2010 - 2016 | | | From-To: |
| states and territor | ries include Arizona, Ca | ver live with a spouse or leg llifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (O | vada, New Mexico, Puerto R | | |
| Part 2 Expla | in the Sources of You | r Income | | | |
| Fill in the total | al amount of income yo | nployment or from operating ou received from all jobs and a have income that you receive | all businesses, including part | -time activities. | lendar years? |
| □ No | | | | | |
| | II in the details. | | | | |
| | ii iii doddiio. | | | | |
| | | Debtor 1 | One as in a series | Debtor 2 | One on the course |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | of current year until ed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$5,181.25 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| Official Form 107 | | Statement of Financial Aff | airs for Individuals Filing for B | ankruptcy | page 1 |

19-51098-amk Doc 1 FILED 05/10/19 ENTERED 05/10/19 16:11:34 Page 34 of 56

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

| 7. | Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen a control, or owner of 20% o | eral partners; partner r more of their votin | erships of which g securities; a | ch you nd any | are a gener managing a | al partner; corporations agent, including one for |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------|-------------------------------------|------------------|----------------------------|---------------------------------------------------|
| | ■ No | | | | | | |
| | Yes. List all payments to an insider. Insider's Name and Address | Datas of navenant | Total amazunt | A | | D | this resume and |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount y still o | | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property | on acc | ount of a d | ebt that benefited an |
| | No | | | | | | |
| | Yes. List all payments to an insider | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount y still or | | Reason for Include cred | this payment ditor's name |
| Pai | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | | |
| | □ No■ Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | | Status of th | ne case |
| | Gfs li Llc vs ELLIS LEE, TANECA | CIVIL JUDGMENT | SUMMIT COUN | | | ☐ Pending | ı |
| | HARRIS 19CV00237 | | MUNICIPAL CO 217 S. High Sti | | | On appe | |
| | 19-CV-00237 | | Akron, OH 44308 | | | Concluded | |
| | | | | | | - 12,719.0 | 00 |
| | Neil Homes Llc vs ELLIS LEE | FORCIBLE | SUMMIT COUN | ITY | | ☐ Pending | I |
| | 14CVG04121 | ENTRY/DETAINER | MUNICIPAL CO | OURT | | ☐ On appe | |
| | | | | | | Conclud | led |
| | | | | | | - 0.00 | |
| | Dbs Financial/ABC Motor Credit vs | Automobile | Akron Municip | al Court | | ☐ Pending | |
| | Ellis M. Lee | Ellis M. Lee 217 South High Street | | | ☐ On appeal | | |
| | 13CVF04387 | | Akron, OH 44308 | | ■ Concluded | | |
| | | | | | | ad attacha | d spizad or laviad? |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below | | rty repossessed, f | oreclosed, g | arnisn | eu, allache | u, scizeu, or icvicu: |
| 10. | | | rty repossessed, f | foreclosed, g | arnisn | eu, allache | u, seizeu, or levieu: |
| 10. | Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | w. | rty repossessed, f | , • | | eu, allache | |
| 10. | Check all that apply and fill in the details below No. Go to line 11. | | rty repossessed, f | , • | arnisno Date | eu, allache | Value of the property |

Case number (if known)

Official Form 107

Debtor 1 Ellis M. Lee

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

| | Creditor Name and Address | | Describe the Property | Date | Value of the property |
|-----|-------------------------------------------------------------------------------------------------------------------------|---------|-------------------------------------------------------------------------------|--------------------------|--------------------------|
| | | | Explain what happened | | property |
| | Gatewyfinsol Attn: Bankruptcy | | Automobile | 08/24/2018 | Unknown |
| | 999 S. Washington Ave., Ste. 1 | 1 | Property was repossessed. | | |
| | Saginaw, MI 48601 | | ☐ Property was foreclosed. | | |
| | | | ☐ Property was garnished. | | |
| | | | ☐ Property was attached, seized or levied. | | |
| 11. | Within 90 days before you filed for ban accounts or refuse to make a payment No Yes. Fill in the details. | | y, did any creditor, including a bank or financial ins se you owed a debt? | stitution, set off any | amounts from your |
| | Creditor Name and Address | 1 | Describe the action the creditor took | Date action was | Amount |
| | | | | taken | |
| 12. | court-appointed receiver, a custodian, No | | was any of your property in the possession of an ather official? | assignee for the ben | ent of creditors, a |
| | ☐ Yes | | | | |
| Pai | t 5: List Certain Gifts and Contribution | ns | | | |
| 13. | Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift. | kruptcy | , did you give any gifts with a total value of more t | han \$600 per person | 1? |
| | Gifts with a total value of more than \$6 per person | 600 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift an Address: | d | | | |
| 14. | Within 2 years before you filed for bank ■ No | kruptcy | , did you give any gifts or contributions with a tota | al value of more than | s \$600 to any charity? |
| | Yes. Fill in the details for each gift or | contrib | oution. | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | | Describe what you contributed | Dates you contributed | Value |
| | <u> </u> | uej | | | |
| Pai | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for banks or gambling? | uptcy | or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Describe the property you lost and | Des | cribe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Inclu | ide the amount that insurance has paid. List pending | loss | lost |

Case number (if known)

Official Form 107

Debtor 1 Ellis M. Lee

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Der | otor 1 Ellis M. Lee | | Case number (if known) | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------|
| Par | t 7: List Certain Payments or Transfers | | | |
| | Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare | ing a bankruptcy petition? | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any prop transferred | Date payment or transfer was made | Amount of payment |
| | Attorney Mary Lou Burns 484 S. Miller Road Akron, OH 44333 | See Attached Attorney Compe Statement for amount paid. | ensation March, 2019 | \$950.00 |
| 17. | Within 1 year before you filed for bankruptcy, of promised to help you deal with your creditors of Do not include any payment or transfer that you list No Yes. Fill in the details. | or to make payments to your creditor | | perty to anyone who |
| | Person Who Was Paid Address | Description and value of any prop transferred | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list. No Yes. Fill in the details. | ness or financial affairs? as security (such as the granting of a s | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details. | | elf-settled trust or similar devic | e of which you are a |
| | Name of trust | Description and value of the property | erty transferred | Date Transfer was made |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the property

Where is the property?

(Number, Street, City, State and ZIP

page 6

Value

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Address (Number, Street, City, State and ZIP Code)

Yes. Fill in the details.

Owner's Name

Debtor 1 Ellis M. Lee Case number (if known)

| Par | t 10: | Give Details About Environmental Information | tion | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------|-------------------------------------|--------------------|--|
| For | the pu | urpose of Part 10, the following definitions a | apply: | | | | |
| | toxic | ronmental law means any federal, state, or less substances, wastes, or material into the air lations controlling the cleanup of these sub- | r, land, soil, surface water, ground | _ | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | |
| Rep | ort all | I notices, releases, and proceedings that yo | u know about, regardless of wher | 1 the | ey occurred. | | |
| 24. | Has a | any governmental unit notified you that you | may be liable or potentially liable | und | ler or in violation of an environme | ental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | | ne of site Iress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| 25. | | you notified any governmental unit of any r No Yes. Fill in the details. | release of hazardous material? | | | | |
| | | ne of site ress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| 26. | | e you been a party in any judicial or administ No Yes. Fill in the details. | trative proceeding under any envi | ironn | mental law? Include settlements a | nd orders. | |
| | | e Title e Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | |
| Par | t 11: | Give Details About Your Business or Conn | ections to Any Business | | | | |
| 27. | | in 4 years before you filed for bankruptcy, d ☐ A sole proprietor or self-employed in a tr ☐ A member of a limited liability company (☐ A partner in a partnership | ade, profession, or other activity, | eith | er full-time or part-time | business? | |
| | | ☐ An officer, director, or managing executi | ve of a corporation | | | | |
| | | ☐ An owner of at least 5% of the voting or € | equity securities of a corporation | | | | |

Describe the nature of the business

Name of accountant or bookkeeper

Official Form 107

Business Name

(Number, Street, City, State and ZIP Code)

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Debtor 1 Ellis M. Lee Case number (if known)

| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--|--|
| | ■ No □ Yes. Fill in the details below. | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 8

| Debtor 1 Ellis M. Le | <u>;e</u> | Case number (if known) |
|---------------------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | |
| Part 12: Sign Below | | |
| are true and correct. I | understand that making a false statement, co e can result in fines up to \$250,000, or impris | any attachments, and I declare under penalty of perjury that the answers oncealing property, or obtaining money or property by fraud in connection conment for up to 20 years, or both. |
| /s/ Ellis M. Lee | | |
| Ellis M. Lee Signature of Debtor 1 | Signature | e of Debtor 2 |
| Date May 9, 2019 | Date | |
| Did you attach addition ■ No □ Yes | nal pages to Your Statement of Financial Aff | airs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to | o pay someone who is not an attorney to hel | p you fill out bankruptcy forms? |
| No | | |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Debtor 1 | Ellis M. Lee | | | |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | NORTHERN DISTRIC | | |
| nited States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | I OF ONIO | |
| case number f known) | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 108 | | | |
| tateme | nt of Intentio | n for Individ | uals Filing Under Chapt | er 7 12/15 |
| | lividual filing under cha | | this form if: | |
| creditors hav | e claims secured by yo | ur property, or | | |
| ou must file th | ever is earlier, unless th | ithin 30 days after you | pired. file your bankruptcy petition or by the date s e for cause. You must also send copies to tl | |
| | eople are filing together | [,] in a joint case, both ar | e equally responsible for supplying correct | nformation. Both debtors must |
| | and accurate as possib our name and case nur | | ded, attach a separate sheet to this form. Or | the top of any additional pages, |
| | | | | |
| | our Creditors Who Have | | | |
| For any credit information b | | art 1 of Schedule D: Cre | editors Who Have Claims Secured by Proper | y (Official Form 106D), fill in the |
| | reditor and the property t | | hat do you intend to do with the property tha cures a debt? | t Did you claim the property as exempt on Schedule C |
| Creditor's | | П | Surrandar the property | □ No |
| name: | | | Surrender the property. Retain the property and redeem it. | LI NO |
| | | | Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | Retain the property and [explain]: | |
| | | _ | | |
| securing debt | i: | _ | | _ |
| | : | | | |
| securing debt | : | | Surrender the property. | □ No |
| securing debt Creditor's name: | | | Surrender the property. Retain the property and redeem it. | — □ No □ Yes |
| securing debt Creditor's name: Description of | | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | |
| Securing debt Creditor's name: Description of property | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a | |
| Creditor's name: | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | |
| Creditor's name: Description of property securing debt | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | □ Yes — |
| Creditor's name: Description of property | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. | |
| securing debt Creditor's name: Description of property securing debt Creditor's | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. | □ Yes — |
| securing debt Creditor's name: Description of property securing debt Creditor's | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a | ☐ Yes — ☐ No |
| securing debt Creditor's name: Description of property securing debt Creditor's name: | f | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes — ☐ No |
| Creditor's name: Description of property securing debt Creditor's name: Description of | f :: | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a | ☐ Yes — ☐ No |
| Creditor's name: Description of property securing debt Creditor's name: Description of property | f :: | | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes — ☐ No |

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

| Debtor 1 Ellis M. Lee | Case number (# | known) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| name: Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you lister in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease in | d in Schedule G: Executory Contracts and Une nexpired leases are leases that are still in effe | ct; the lease period has not yet ended. 5(p)(2). |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

| Debte | or 1 E | Ilis M. Lee | Case number (if known) |
|--------|---------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| | | | |
| | | | |
| Part 3 | 3: Si | gn Below | |
| | | y of perjury, I declare that I have in is subject to an unexpired lease. | cated my intention about any property of my estate that secures a debt and any personal |
| X | /s/ Elli: | s M. Lee | X |
| | Ellis M | . Lee | Signature of Debtor 2 |
| | Signatu | re of Debtor 1 | |
| | Date | May 9, 2019 | Date |

Statement of Intention for Individuals Filing Under Chapter 7

page 3

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

| Fill in this information to identify your case: | | | irected in this form and ir | n Form |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------|-----------------------------|
| Debtor 1 Ellis M. Lee | | 22A-1Supp: | | |
| Debtor 2 (Spouse, if filing) | | ■ 1. There is no pres | umption of abuse | |
| United States Bankruptcy Court for the: Northern District of C | Ohio | applies will be m | o determine if a presump nade under <i>Chapter 7 Me</i> | |
| Case number (if known) | | ☐ 3. The Means Test | icial Form 122A-2). does not apply now beca | |
| | | | service but it could appl | y later. |
| O#:-!-! F 400A - 4 | | ☐ Check if this is a | n amended filing | |
| Official Form 122A - 1 | | | | |
| Chapter 7 Statement of Your Curr | ent Monthly Inc | come | | 12/15 |
| Be as complete and accurate as possible. If two married people are attach a separate sheet to this form. Include the line number to whi case number (if known). If you believe that you are exempted from qualifying military service, complete and file Statement of Exemption Part 1: Calculate Your Current Monthly Income | ich the additional information a presumption of abuse beca on from Presumption of Abus | applies. On the top of ai | ny additional pages, write y marily consumer debts or b | your name and because of |
| What is your marital and filing status? Check one only | . | | | |
| Not married. Fill out Column A, lines 2-11. | | | | |
| ☐ Married and your spouse is filing with you. Fill out | | s 2-11. | | |
| ☐ Married and your spouse is NOT filing with you. Yo | • • | | | |
| ☐ Living in the same household and are not legally | | | | |
| Living separately or are legally separated. Fill ou penalty of perjury that you and your spouse are leg living apart for reasons that do not include evading | ally separated under nonba | nkruptcy law that applie | es or that you and your s | |
| Fill in the average monthly income that you received from all so 101(10A). For example, if you are filing on September 15, the 6-mon the 6 months, add the income for all 6 months and divide the total by spouses own the same rental property, put the income from that pro | oth period would be March 1 throws 6. Fill in the result. Do not include: | ough August 31. If the amoude any income amount m | ount of your monthly income ore than once. For example, | varied during , if both |
| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| Your gross wages, salary, tips, bonuses, overtime, ar payroll deductions). | nd commissions (before al | \$ | \$ | |
| Alimony and maintenance payments. Do not include payment B is filled in. | , | \$ | \$ | |
| 4. All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, yand roommates. Include regular contributions from a spot filled in. Do not include payments you listed on line 3. | nclude regular contributions your dependents, parents, | \$600.00 | \$ | |
| 5. Net income from operating a business, profession, or | | | | |
| Once and the formal between | Debtor 1 \$ 0.00 | | | |
| Gross receipts (before all deductions) | -\$ 0.00 -\$ | | | |
| Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm | | >\$ 0.00 | \$ | |
| 6. Net income from rental and other real property | <u> </u> | | · | |
| 2.12 3.1.15 P. S.P.S.L. | Debtor 1 | | | |
| Gross receipts (before all deductions) | \$0.00 | | | |
| Ordinary and necessary operating expenses | -\$ 0.00 | | | |
| Net monthly income from rental or other real property | \$0.00 Copy here - | | \$ | |
| 7. Interest, dividends, and royalties | | \$ 0.00 | \$ | |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------|-------------------|-------------|-----------------------------------|------------|----------------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | | |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: | received was a bene | fit under | | | | | |
| | For you\$ | 0. | .00 | | | | | |
| | For your spouse \$ | | | | | | | |
| 9. | Pension or retirement income. Do not include any ambenefit under the Social Security Act. | nount received that wa | as a | \$ | 0.00 | \$ | | |
| 10. | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or paymer manity, or internationa | nts Il or | | | | | |
| | • | | | \$ | 0.00 | \$ | | |
| | | | | \$ | 0.00 | \$ | | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the column A t | | \$ | 1,300.00 | + | | = \$ | 1,300.00 |
| | | | | | | | incom | current monthly e |
| Part | 2: Determine Whether the Means Test Applies to | o You | | | | | | |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 1 | | Сору | y line 11 h | ere=> | \$ | 1,300.00 |
| | Multiply by 12 (the number of months in a year) | | | | | | X ' | |
| | 12b. The result is your annual income for this part of the | e form | | | | 12b. | \$ | 15,600.00 |
| 13. | Calculate the median family income that applies to | you. Follow these ste | ps: | | | | | |
| | Fill in the state in which you live. | ОН | | | | | | |
| | Fill in the number of people in your household. | 4 | | | | | | |
| | Fill in the median family income for your state and size | | | | | 13. | \$ | 89,454.00 |
| | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | | pecified | in the separa | ate instruc | ions | | |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. Of Go to Part 3. | n the top of page 1, ch | neck box | 1, There is r | no presum | ption of abuse | | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2 | 2, The pre | esumption of | abuse is o | determined by | Form 12 | 22A-2. |
| Part | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information o | n this sta | tement and | in any atta | chments is tru | e and c | orrect. |
| | V /s/ Ellis M Loo | | | | | | | |
| | X /s/ Ellis M. Lee Ellis M. Lee | | | | | | | |
| | Signature of Debtor 1 | | | | | | | |
| | Date May 9, 2019 MM / DD / YYYY | | | | | | | |
| | If you checked line 14a, do NOT fill out or file Forn | n 122A-2. | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and fi | | | | | | | |
| | in you oncomed into 1-b, till out I offit 122A-2 and it | widi diis loiili. | | | | | | |

Official Form 122A-1

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: employment

Year-to-Date Income:

Last Year:

This Year:

Current Year-to-Date Income: \$4,200.00 from check dated 4/30/2019.

Income for six-month period (Current+(Ending-Starting)): \$4,200.00 .

Average Monthly Income: _\$700.00 .

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Prior employment

Income by Month:

| 6 Months Ago: | 11/2018 | \$0.00 |
|---------------|--------------------|--------|
| 5 Months Ago: | 12/2018 | \$0.00 |
| 4 Months Ago: | 01/2019 | \$0.00 |
| 3 Months Ago: | 02/2019 | \$0.00 |
| 2 Months Ago: | 03/2019 | \$0.00 |
| Last Month: | 04/2019 | \$0.00 |
| | Average per month: | \$0.00 |

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Contribution to household expenses

Income by Month:

| 6 Months Ago: | 11/2018 | \$600.00 |
|---------------|--------------------|----------|
| 5 Months Ago: | 12/2018 | \$600.00 |
| 4 Months Ago: | 01/2019 | \$600.00 |
| 3 Months Ago: | 02/2019 | \$600.00 |
| 2 Months Ago: | 03/2019 | \$600.00 |
| Last Month: | 04/2019 | \$600.00 |
| | Average per month: | \$600.00 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Cha | pter 7: | Liquidation |
|----------|---------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

| | 1, | of the in District of Onio | | | |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------|--------------------------|--------------|
| In r | e Ellis M. Lee | | Case No. | | |
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPI | ENSATION OF ATTOR | NEY FOR DE | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation | ling of the petition in bankruptcy, | or agreed to be paid | to me, for services rene | dered or to |
| | For legal services, I have agreed to accept | | \$ | 950.00 | |
| | Prior to the filing of this statement I have received | d | \$ | 950.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | \$_335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed con | npensation with any other person u | inless they are mem | bers and associates of r | ny law firm. |
| | ☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n | | | | v firm. A |
| 6. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects | of the bankruptcy of | ase, including: | |
| | a. Analysis of the debtor's financial situation, and reneb. Preparation and filing of any petition, schedules, stc. Representation of the debtor at the meeting of creded. [Other provisions as needed] | atement of affairs and plan which | may be required; | - | iptcy; |
| 7. | By agreement with the debtor(s), the above-disclosed fine Representation of debtor in adversaria | | | | |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding. | any agreement or arrangement for p | payment to me for r | epresentation of the del | otor(s) in |
| ı | May 9, 2019 | /s/ Mary Lou Burn | s | | |
| | Date | Mary Lou Burns 0 | 071363 | | |
| | | Signature of Attorney Mary Lou Burns, A | | | |
| | | 484 S. Miller Road | | | |
| | | Akron,, OH 44333 330-668-6006 Fax | · 330-860-0001 | | |
| | | yourfreshstart@h | | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Ohio

| In re | Ellis M. Lee | | Case No. | |
|--------|------------------------------|----------------------------------------------------------|----------------------------------------|--|
| | | Debtor(s) | Chapter 7 | |
| | VI | ERIFICATION OF CREDITOR M | IATRIX | |
| | · · | | | |
| Γhe ab | ove-named Debtor hereby veri | fies that the attached list of creditors is true and con | rect to the best of his/her knowledge. | |
| Date: | May 9, 2019 | /s/ Ellis M. Lee | | |
| | | Ellis M. Lee | | |
| | | Signature of Debtor | | |

Big Lots Corp. 4900 E. Dublin Granville Road Columbus, OH

Buckeye State Credit Union 197 E. Thornton Street Akron, OH 44309

Cbe Group Attn: Bankruptcy 1309 Technology Parkway Cedar Falls, IA 50613

CCI/Contract Callers Inc Attn: Bankruptcy Dept 501 Greene St Ste 302 Augusta, GA 30901

Centralized Business Solutions, Inc Attn: Bankruptcy Po Box 2818 North Canton, OH 44720

Citizens Bank One Citizens Plaza Providence, RI 02903

Dbs Financial/ABC Motor Credit Attn: Bankruptcy 2823 Gilchrist Rd Akron, OH 44305

Dominion East Ohio P. O. Box 26785 Richmond, VA 23261-6785

First Energy 76 S. Main Street Akron, OH 44308

First Federal Credit Control Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 Cleveland, OH 44122 Franco M. Barile, LLC 10900 Pearl Road, Suite C-3 Strongsville, OH 44136

Gatewyfinsol Attn: Bankruptcy 999 S. Washington Ave., Ste. 1 Saginaw, MI 48601

Huntington Bank 7450 Huntington Park Drive Columbus, OH 43235

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

KeyBank 127 Public Square Cleveland, OH 44114

Ohio Dept of Motor Vehicles 1970 West Broad Street Columbus, OH 43223

QVC QVC Studio Park 1200 Wilson Drive West Chester, PA 19380-4262

Robert E. Soles Jr., CO., LPA 6545 Market Avenue North North Canton, OH 44721

Taneca L. Harris 1127 Victory Street Akron, OH 44301

Time Warner/Spectrum 1919 Brittain Road Akron, OH 44310